
 <b>VERMONT</b> <b>DEPARTMENT FOR CHILDREN AND FAMILIES</b> Family Services Policy Manual		<h1>51</h1>
Chapter:	Child Safety	
Subject:	Screening Reports of Child Abuse and Neglect	Page 1 of 12
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## Purpose

To describe requirements for Centralized Intake and Emergency Services (CIES) staff in gathering thorough information to guide decision-making about report acceptance and support planning for child safety interventions; to provide guidance for the screening of reports of child abuse or neglect.

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## Definitions

See Policy 50.

## Policy

### Documenting Reports of Alleged Child Abuse or Neglect

The division's focus on child safety requires that the social worker gather thorough information from the reporter about:

- the alleged abuse or neglect;
- the family's circumstances, strengths, family resources and natural supports

Thorough information allows for an accurate determination about accepting the report and about the immediacy of response. If accepted, it will allow the district supervisor and social worker to plan a child safety intervention in a way that will minimize risk to the child and to the social worker.

If the social worker judges that a child may be in immediate jeopardy, he or she will immediately notify the supervisor.


The social worker will promptly enter all reports of abuse and neglect in the FSDNet intake module. Documentation of concerns about the same incident from different reporters may be appended and screened for acceptance for up to 30 days.

### Allegations of Child Abuse or Neglect by Department Employees

If a reporter alleges child abuse or neglect by a department employee, the CIES supervisor will immediately notify the Family Services Director of Operations or designee. If accepted under Chapter 49, the Secretary of Agency of Human Services will determine the appropriate unit to conduct the child safety intervention.

### Screening Reports of Child Maltreatment

In child protective services, we are challenged to promote the safety of children while respecting family integrity and the diversity of family values and lifestyles. The division does not investigate concerns about the child's general condition.

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There must be a valid allegation that there is harm or risk of harm to the child caused by abuse or neglect as defined by 33 VSA Chapter 49 or a pattern of concerns that suggest the child may be in need of care and supervision, as defined in 33 VSA Chapter 51.

The division shall determine whether to accept a report as soon as sufficient information is available to make that determination. Decisions are based on the information provided, regardless of who provided the information and whether their identity is known.

A CIES supervisor makes the initial determination about report acceptance. Reports that indicate that a child is in imminent danger will be screened immediately. All other reports will be screened by midnight on the day they are received.

If not accepted by the CIE supervisor, a second person<sup>1</sup> will screen the report within 48 hours of the first screen.


If accepted by the second screener, a child safety intervention will commence within 72 hours of the receipt of the report. If the report was accepted on the basis of further information received, the child safety intervention will commence within 72 hours of the receipt of that information. (See Policy 52 for commencement requirements.)

#### **Gathering More Information**

At times, information in the report may be insufficient to justify report acceptance. If the supervisor believes that more relevant information may be available, he or she will assign an intake social worker to gather more information. This may include, in the case of second-hand reports, attempting to contact the original informant.

When a report indicates that the family may have had previous child protection involvement, the supervisor will assign an intake worker to attempt to gather more information about that involvement. Examples of involvement may include past investigations or assessments, open protective services cases or custody episodes.

<sup>1</sup> A Senior Social worker, Supervisor or District Director. The Director of Operation, or the Policy and Operations Manager may also determine that a report is a valid allegation.

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The purpose of gathering more information is to determine whether a report should be accepted and do not represent the commencement of a safety intervention. When a social worker has been assigned to gather more information, the supervisor must establish and document clear tasks and deadlines to be met<sup>2</sup>. Any additional information gathered will be appended to the intake report.

Reports will be available for appending and/or accepting with more information for 30 days. Once accepted, the investigation must be commenced according to the response priority determined by the assigning supervisor.

#### **Determining Response Priority for Child Safety Interventions**

All child safety interventions must be commenced within 72 hours. If multiple CSIs are received on the same day, the response priority is used to determine the order of response.

#### **Jurisdiction Issues**

The division shall respond to reports of child abuse or neglect when:


1. the alleged abuse or neglect (including risk of harm) occurred or is occurring in Vermont, or
2. the alleged abuse or neglect occurred out of state and the child is a resident of or is present in Vermont.

When the division has determined that a report is a valid allegation and the child or the alleged perpetrator or both do not live in Vermont, the department may respond in one of the following ways, as most appropriate to the situation. The supervisor who determines that an allegation is valid may decide to:

1. Open an investigation;
2. Open an assessment; or,
3. Notify a child welfare system and/or law enforcement agency in another jurisdiction of the need to respond, including coordinating a joint response with the other jurisdiction when indicated.

Allegations that a resident of Vermont sexually abused a child will always be accepted. When accepting these reports, if the child does not live in Vermont, the investigation will be assigned to the most appropriate district, based on:

<sup>2</sup> This can be done in either the rationale for non-acceptance or appended to the intake report.

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1. Where the alleged perpetrator resides;
2. The law enforcement agency that is investigating; or,
3. If the child is temporarily in Vermont, his or her current location.

### **Allegations of Maltreatment of Children in Open Cases**

When an assigned social worker receives information that alleges abuse or neglect of a child in Family Support case, the social worker will, as a mandated reporter, call in a report to CIES.

If accepted, the child safety intervention will be conducted by a social worker other than the assigned social worker in close coordination with the assigned social worker.

### **Criteria for Report Acceptance Under Chapter 49**


A report will be accepted for a child safety intervention under the authority of Chapter 49 if the information in the intake report gives the supervisor determines that the child may be an abused or neglected child, defined as:

- “a child whose physical health, psychological growth and development or welfare is harmed or is at substantial risk of harm by the acts or omissions of his or her parent or other person responsible for the child's welfare; or
- a child who is sexually abused or at substantial risk of sexual abuse by any person”; or,
- a child who died as a result of physical abuse (33 V.S.A. §4912(2)(a).

It is not necessary for all of the components required for substantiation to be present in a report for that report to be accepted. The division will assume that any adult residing in the child's home serves in a parental role unless there is evidence to the contrary.

The following sections provide more specific guidance about accepting reports of certain types of child maltreatment.

1. Allegation is that a person responsible for the child's welfare caused the child to be abused or neglected, by other than accidental means:

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<b>Type of allegation</b>	<b>Allegation</b>
Physical Abuse	<p>Physical injury or Serious Physical Injury (see Policy 50 definitions)</p> <p>When the sole allegation is that the child has a mark caused by a person responsible for the child's welfare, but no other injury, the report will not be accepted unless the mark lasted for or appears likely to last for more than twenty-four hours.</p>
Emotional Maltreatment	<p>See Policy 50 definition.</p> <p>The pattern does not have to be of the same behavior for the purpose of accepting the report for investigation.</p>
Neglect	<p>See Policy 50 definition.</p> <p>Neglect causes actual or substantial risk of negative consequences to the child's health.</p>
Risk of Physical Harm:	<p>See Policy 50 definition. Examples of risk of harm include but are not limited to:</p> <ul style="list-style-type: none"> <li>• DUI with children in the car in circumstances that suggest significant risk to the child;</li> <li>• Corporal punishment of child under 1 years of age no injury necessary; or.</li> <li>• A child under the age 3 has experienced malicious punishment, with no physical injury resulting.</li> <li>• Incapacity, due to a mental or physical illness/condition or developmental disability, of providing age-appropriate supervision, and no other person is available to assist.</li> <li>• The reporter has observed or a professional reports that a parent or caretaker has a current pattern of use of methamphetamine or the child has been exposed to methamphetamine production.</li> <li>• There is significant risk of serious physical harm to a child due to domestic violence in the home. In considering whether a child is at significant risk, the following issues should be considered: <ul style="list-style-type: none"> <li>○ Past history of substantiation(s) or conviction(s) or reported history of child maltreatment.</li> <li>○ Criminal history of domestic-violence related crimes.</li> <li>○ Proximity of the children to the domestic violence as well as the nature of the violence or crime; including when a child physically intervenes in a domestic assault or is forced to participate in a domestic assault.</li> <li>○ Use of weapons or objects that could cause harm in the presence of children in the context of domestic violence. Issues related to who is the dominant aggressor and whether the person is acting in self-defense will be taken</li> </ul> </li> </ul>


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Type of allegation	Allegation
	<p>into consideration as part of the case determination.</p> <ul style="list-style-type: none"> <li>○ In the context of domestic violence, presence of direct threats (including verbal threats) of serious bodily injury or death to or regarding the child or other children of the family or in the household.</li> </ul> <p>The division shall accept a report, regardless of the above issues, when:</p> <ul style="list-style-type: none"> <li>• there is a death of a parent or caretaker as a result of domestic violence and the child was reported to have been in the home or on the property when the incident occurred, regardless of the child's exact location; and/or</li> <li>• a gun is discharged inside a home when the child(ren) are also in the home regardless of where the child(ren) are physically in the home.</li> </ul> <p>A referral from an adult alleging he or she was abused or neglected as a child will not be considered a valid allegation of child abuse or neglect of that person. The report may be accepted as an allegation of risk of harm if the alleged perpetrator is caretaking children currently and there may be significant danger to those children.</p> <p>The division does not intervene in situations in which the sole concern is that parents or caretakers fail to:</p> <ul style="list-style-type: none"> <li>• Install smoke detectors;</li> <li>• Use car seats for young children;</li> <li>• Use seatbelts for children;</li> <li>• Ensure the use of bicycle or motorcycle helmets by children;</li> <li>• Ensure the child receives recommended immunizations;</li> <li>• Ensure the child receives recommended newborn prophylaxis (Vitamin K, newborn hearing screen); or</li> <li>• The only allegation is that a child has witnessed or been exposed to domestic violence.</li> <li>• Failure to give prescribed medication the failure will not have serious health implications on the part of the child (e.g. ADHD medications).</li> </ul>

2. Any person is alleged to have sexually abused a child or caused a child to be a significant risk of sexual abuse.

For allegations of Lewd and Lascivious Conduct or Sexual Assault, the report should first be evaluated for elements of force, threat or coercion. If these are



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not present the screener should also consider whether there is a significant difference in age, size or development.


<b>Type of Allegation</b>	<b>Allegation</b>
Minor Sex Trafficking or Prostitution	See Policy 50 definition.
Incest	See Policy 50 definition.
Lewd and Lascivious Behavior	See Policy 50 definition.
Luring	See Policy 50 definition.
Obscenity or Possession of Child Pornography	See Policy 50 definition.
Sexual Assault	See Policy 50 definition.
Voyeurism	See Policy 50 definition.
Risk of Sexual Abuse	<p>A registered sex offender who sexually abused a child or vulnerable adult or person substantiated for sexually abusing a child is residing with or spending unsupervised time with a child. Information known at the time of the intake about the offender's risk level and the caretaker's protectiveness will be considered in the screening process.</p> <p>A referral from an adult alleging he or she was abused or neglected as a child will not be considered a valid allegation of child abuse or neglect of that person. The report may be accepted as an allegation of risk of harm if the alleged perpetrator has current access to children.</p> <p>If the alleged perpetrator was a child at the time of the past sexual abuse, the supervisor will exercise judgement based on the amount of time that has elapsed, the seriousness of the alleged conduct, and any subsequent history of sexual abuse or offenses by the actor.</p>

Should the division be informed about repeated incidents of such child-to-child sexual abuse and it appears a caretaker has failed to attend to the child's needs; the allegations may be opened under medical neglect or risk of harm, or as a CHINS (B) Assessment.

#### **Criteria for Report Acceptance Under Chapter 51**


The division may conduct an assessment under the authority of 33 VSA Chapter 51. The focus of the assessment is on whether a child may be in need of care and supervision (CHINS (B)). The division will conduct an assessment under the following circumstances:



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Parental Capacity	A pattern of concerns, a single incident, or concerns about parental capacity that do not meet criteria for acceptance under 33 VSA Chapter 49, but suggest that the child may be without proper parental care or subsistence, medical, or other care necessary for his or her well-being.
Educational Neglect	<p>It is alleged that a parent/caretaker has neglected a child's education. 16 VSA §1121 requires that a person having the control of a child between the ages of 6 and 16 years shall cause the child to attend a public school, an approved or recognized independent school or a home study program for the full number of days for which that school is held, unless the child:</p> <ul style="list-style-type: none"> <li>○ is mentally or physically unable to attend; or</li> <li>○ has completed the tenth grade; or</li> <li>○ is excused by the superintendent or a majority of the school directors as provided in this chapter or</li> <li>○ is enrolled in and attending a postsecondary school which is approved or accredited in Vermont or another state.</li> </ul>
Pregnant Women	<p>A woman is pregnant and either parent or caretaker has a substantial history with DCF. An assessment may begin approximately one month before the due date or sooner if medical findings indicate that the mother may deliver early.</p> <p>A physician certifies or the mother admits to use of illegal substances or non-prescribed prescription medication during the last trimester of her pregnancy. When there is an allegation that there is likely to be a serious threat to a child's health or safety due to the mother's substance abuse during pregnancy, intervention before a child's birth may assist the family to remediate the issues and avoid the need for DCF custody after the birth. Therefore, such assessments may begin approximately one month before the due date or sooner if medical findings indicate that the mother may deliver early.</p>
Newborn Infant	<p>A newborn has a positive toxicology screen for illegal substances or prescription medication not prescribed to the patient or administered by a physician; or</p> <p>A newborn has been deemed by a medical professional to have Neonatal Abstinence Syndrome through NAS scoring as the result of maternal use of illegal substances or non-prescribed prescription medication.</p> <p>A newborn has been deemed by a medical professional to have Fetal Alcohol Spectrum Disorder.</p>

Note: Please see Policy 60: Youth Assessments which includes children ages 6-16 who are habitually truant (youth refusing to attend school CHINSC).

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### **Assignment to Investigation or Assessment Response**

The division may conduct an investigation of any valid allegation. In making the decision about the whether to conduct an assessment or an investigation, the division shall consider the following factors when determining whether to respond with an investigation or an assessment response:

1. There is reason to believe that a child's safety will be jeopardized if parental permission cannot be obtained to interview the child.
2. The nature and severity of the abuse and extent of a child's injury, if any.
3. The alleged perpetrator's prior history of child abuse or neglect.
4. The chronicity of the abuse.
5. To the extent known by the reporter, the alleged perpetrator's willingness and capability to accept responsibility for the conduct and engage in a plan of services.
6. Any strengths and formal and informal supports and/or resources that are available or exist within the family and community, including resources and supports for people with disabilities if relevant.


The supervisor who determines that an allegation is valid will determine if the case should be assigned for investigation or assessment.

### **Mandatory Investigation Track**

The division's initial safety intervention shall be an investigation if it alleges substantial child endangerment, including allegations that:

1. A child has been sexually abused by any adult.
2. A child is at risk of harm for sexual abuse by any adult.
3. The acts or omissions of a person responsible for a child's welfare resulted in child fatality.
4. A person responsible for a child's welfare:
  - a. abandoned the child;
  - b. maliciously punished the child;
  - c. physically abused a child under the age of 3, including shaking;
  - d. physically abused a child of any age who is non-verbal or non-ambulatory;
  - e. allowed a child to be exposed to methamphetamine production or pre-production.

Valid allegations involving the presence of multiple injuries should be assigned as an investigation response unless there is information that suggests the injuries

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occurred as a result of a single incident that did not include the use of malicious punishment and is not otherwise outlined above as requiring investigation response.

Valid allegations of child abuse and neglect within licensed and regulated facilities will be accepted for investigation if the alleged perpetrator is over the age of 10. See Policy 54: Investigating Reports of Child Abuse or Neglect in Regulated Facilities.

#### **Track Assignment for Accepted Reports of Sexual Abuse When Alleged Actor is Under Age 18**

<b>Age of Actor</b>	<b>Type of Child Safety Intervention</b>
Under 6 <sup>th</sup> birthday	CHINS(B) Assessment, usually focusing on actor's family
Age 6 to 14 <sup>th</sup> birthday	Chapter 49 Assessment
Age 14 and older	Chapter 49 Investigation


#### **Notification of Mandated Reporters**

CIES shall inform mandated reporters when a report is not accepted for a child safety intervention.

District offices shall inform mandated reporters that a report has been accepted for child safety intervention, the track assignment, and the assigned worker. If it is in the best interest of the child, non-mandated reporters may also be informed that the report was accepted (FS-259).

#### **Assignment of Cases with Cross-District Implications**

At times, a new report is accepted concerning a family with an open Family Support case who has recently moved to another district. In that case, the new child safety intervention will be assigned to the district of the family's residence, in order to expedite an assessment of the child's safety. The districts will then determine if the open case should be transferred as directed in Policy No. 211.

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When there is an open case in a district and child in custody reports abuse while placed out of district (excluding licensed or regulated facilities), the child safety investigation will be assigned to the district where the child's case originates.

#### **Conflict Investigations**

At times, the assignment of a child safety intervention to a particular district may be or appear to be a conflict of interest. If that may be the case, the supervisor should contact the Operations Manager to discuss the appropriate assignment of the case to another district.

In some cases, the Director of Operations may assign the RLSI to conduct the child safety intervention depending upon the nature of conflict.